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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Examiner's Signature <u>Jan</u> Initials <u>Jan</u>		<b>STATE OR COUNTRY</b> NJ	<b>SHEETS DRAWING</b> 5	<b>TOTAL CLAIMS</b> 15	<b>INDEPENDENT CLAIMS</b> 2					
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